

Applicant Name: **PROPOSED FESTIVAL EXPENSES****BUDGET ITEM****TOTALS****1. Contracted Artistic Services & Artistic Fees (including travel, lodging, and per diem)**

A.	<input type="text"/>	<input type="text"/>
B.	<input type="text"/>	<input type="text"/>
C.	<input type="text"/>	<input type="text"/>
Total Contracted Artistic Services & Artists Fees Expenses		<input type="text"/>

2. Production Expenses

A.	Insurance	<input type="text"/>
B.	Venue/Space Rental	<input type="text"/>
C.	Equipment Rental	<input type="text"/>
D. Other:	<input type="text"/>	<input type="text"/>
Total Production Expenses		<input type="text"/>

3. Marketing/Promotion**Total Marketing Expenses** **4. Accessibility Services, Public Health & Safety Compliance**

A.	<input type="text"/>	<input type="text"/>
B.	<input type="text"/>	<input type="text"/>
Total Accessibility Services, Public Health & Safety Compliance Expenses		<input type="text"/>

5. Digital Operations

A.	<input type="text"/>	<input type="text"/>
B.	<input type="text"/>	<input type="text"/>
Total Digital Operations Expenses		<input type="text"/>

Ineligible Expenses**6. All Other Festival Expenses**

A.	Salaried Personnel/Staff	<input type="text"/>
B.	Legal: Licenses, Permits, etc.	<input type="text"/>
C. Other:	<input type="text"/>	<input type="text"/>
Total Other Expenses		<input type="text"/>

TOTAL FESTIVAL EXPENSES**Total Eligible Expenses** **Total Festival Expenses**

FEST EXPENSES AND INCOME FORM

PROPOSED FESTIVAL INCOME

BUDGET ITEM

TOTALS

Earned Revenue

7. Admissions

Total Admissions

8. Vendors

A. Food & Beverage Vendors

B. Other Vendors or Commercial Booths

C. Other:

Total Contracted Services Revenue

9. Other Earned Revenue

A. Drink Sales

B. Other:

Total Other Earned Revenue

Contributed Support

10. Corporate Sponsorships

Total Admissions

11. Foundation/Individual Contributions

A.

B.

C.

Total Foundation/Individual Contributions

12. Government Support

A. Federal/Regional

B. State (No ACA funds)

C. County

D. City

Total Government Support

13. Organizational Support

Applicant Cash

Total Org. Support

TOTAL FESTIVAL INCOME

Festival Income Subtotal

Grant Award *

Festival Income Total

* Your **Grant Award** is equal to your **Total Eligible Expenses** up to \$5,000. If your **Total Eligible Expenses** (as calculated on page 1) exceed \$5,000, enter \$5,000 in the **Grant Award** field. Otherwise, enter the **Total Eligible Expenses** amount.